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**\*\* CONTINUING DATA \*\*\*\*\*** QN 8/19/06  
 This appln claims benefit of 60/107,802 11/10/1998

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** QN 8/19/06

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 12/09/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	<b>STATE OR COUNTRY</b> OK	<b>SHEETS DRAWING</b> 28	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 6
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**ADDRESS**  
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**TITLE**  
 ON-LINE SCHEDULE SYSTEM WITH PERSONALIZATION FEATURES

<b>FILING FEE RECEIVED</b> 1228	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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